

(Official Form 1) (12/03)

<b>FORM B1</b>		<b>United States Bankruptcy Court</b>		<b>Voluntary Petition</b>	
<b>Northern</b>		<b>District of</b>		<b>Illinois</b>	
Name of Debtor (if individual, enter Last, First, Middle): <b>KEVIN D. ANDERSON</b>			Name of Joint Debtor (Spouse) (Last, First, Middle):		
All Other Names used by the Debtor in the last 6 years (include married, maiden, and trade names):			All Other Names used by the Joint Debtor in the last 6 years (include married, maiden, and trade names):		
Last four digits of Soc. Sec. No./Complete EIN or other Tax I.D. No. (if more than one, state all): <b>0465</b>			Last four digits of Soc. Sec. No./Complete EIN or other Tax I.D. No. (if more than one, state all):		
Street Address of Debtor (No. & Street, City, State & Zip Code): <b>5N770 Glendale Road Medinah, IL 60157</b>			Street Address of Joint Debtor (No. & Street, City, State & Zip Code):		
County of Residence or of the Principal Place of Business: <b>DuPage</b>			County of Residence or of the Principal Place of Business:		
Mailing Address of Debtor (if different from street address):			Mailing Address of Joint Debtor (if different from street address):		
Location of Principal Assets of Business Debtor (if different from street address above):					

**Information Regarding the Debtor (Check the Applicable Boxes)****Venue (Check any applicable box)**

- ☒ Debtor has been domiciled or has had a residence, principal place of business, or principal assets in this District for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other District.
- ☐ There is a bankruptcy case concerning debtor's affiliate, general partner, or partnership pending in this District.

**Type of Debtor (Check all boxes that apply)**

- ☒ Individual(s) ☐ Railroad
- ☐ Corporation ☐ Stockbroker
- ☐ Partnership ☐ Commodity Broker
- ☐ Other ☐ Clearing Bank

**Chapter or Section of Bankruptcy Code Under Which the Petition is Filed (Check one box)**

- ☒ Chapter 7 ☐ Chapter 11 ☐ Chapter 13
- ☐ Chapter 9 ☐ Chapter 12
- ☐ Sec. 304 - Case ancillary to foreign proceeding

**Nature of Debts (Check one box)**

- ☒ Consumer/Non-Business ☐ Business

**Filing Fee (Check one box)**

- ☒ Full Filing Fee attached
- ☐ Filing Fee to be paid in installments (Applicable to individuals only)  
Must attach signed declaration for the court's consideration  
certifying that the fee except in installments.

**Chapter 11 Small Business (Check all boxes that apply)**

- ☐ Debtor is a small business as defined in 11 U.S.C. § 101
- ☐ Debtor is and elects to be considered a small business under 11 U.S.C. § 1121(e) (Optional)

**Statistical/Administrative Information (Estimates only)**

- ☐ Debtor estimates that funds will be available for distribution to unsecured creditors.
- ☒ Debtor estimates that, after any exempt property is excluded and administrative expenses be no funds available for distribution to unsecured creditors.

Estimated Number of Creditors

1-15	16-49	50-99	100-199	200-999	1000
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Estimated Assets

\$0 to \$50,000	\$50,001 to \$100,000	\$100,001 to \$500,000	\$500,001 to \$1 million	\$1,000,001 to \$10 million	\$10,000,001 to \$50 million	\$50,000,001 to \$100 million
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Estimated Debts

\$0 to \$50,000	\$50,001 to \$100,000	\$100,001 to \$500,000	\$500,001 to \$1 million	\$1,000,001 to \$10 million	\$10,000,001 to \$50 million	\$50,000,001 to \$100 million
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**U.S. Bankruptcy Court**  
**Northern District of Illinois**  
 Filed: 12/16/2004  
 Time: 14:12:04  
 Debtor: KEVIN D ANDERSON  
 Case: 04-46274  
 Chapter: 7 Rec. #: 3115926  
 Judge: John Squires  
 341 mtg: 02/01/2005 @ 02:00PM  
 Trustee: BRENDA PORTER-HELMS  
 1:04BK46274-BK001

<b>Voluntary Petition</b> (This page must be completed and filed in every case)		Name of Debtor(s): <b>KEVIN D. ANDERSON</b>	
<b>Prior Bankruptcy Case Filed Within Last 6 Years (If more than one, attach additional sheet)</b>			
Location Where Filed:		Case Number:	Date Filed:
<b>Pending Bankruptcy Case Filed by any Spouse, Partner or Affiliate of this Debtor (If more than one, attach additional sheet)</b>			
Name of Debtor:		Case Number:	Date Filed:
District:		Relationship:	Judge:
<b>Signatures</b>			
<b>Signature(s) of Debtor(s) (Individual/Joint)</b> I declare under penalty of perjury that the information provided in this petition is true and correct. [If petitioner is an individual whose debts are primarily consumer debts and has chosen to file under chapter 7] I am aware that I may proceed under chapter 7, 11, 12 or 13 of title 11, United States Code, understand the relief available under each such chapter, and choose to proceed under chapter 7. I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.  X <u><i>Kevin D. Anderson</i></u> Signature of Debtor  X _____ Signature of Joint Debtor  _____ Telephone Number (If not represented by attorney) <u>12-16-04</u> Date		<b>Exhibit A</b> (To be completed if debtor is required to file periodic reports (e.g., forms 10K and 10Q) with the Securities and Exchange Commission pursuant to Section 13 or 15(d) of the Securities Exchange Act of 1934 and is requesting relief under chapter 11) <input type="checkbox"/> Exhibit A is attached and made a part of this petition.  <b>Exhibit B</b> (To be completed if debtor is an individual whose debts are primarily consumer debts) I, the attorney for the petitioner named in the foregoing petition, declare that I have informed the petitioner that [he or she] may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each such chapter. X <u><i>Edward C. Richard</i></u> <u>12/16/04</u> Signature of Attorney for Debtor(s) Date  <b>Exhibit C</b> <input type="checkbox"/> Does the debtor own or have possession of any property that poses a threat of imminent and identifiable harm to public health or safety? <input checked="" type="checkbox"/> Yes, and Exhibit C is attached and made a part of this petition. <input checked="" type="checkbox"/> No	
X <u><i>Edward C. Richard</i></u> Signature of Attorney for Debtor(s) <u>Edward C. Richard</u> Printed Name of Attorney for Debtor(s) <u>Chuhak &amp; Tecson, P.C.</u> Firm Name <u>30 South Wacker Dr., Suite 2600</u> Address <u>Chicago, IL 60606</u> <u>(312) 444-9300</u> Telephone Number <u>December 16, 2004</u> Date		<b>Signature of Non-Attorney Petition Preparer</b> I certify that I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110, that I prepared this document for compensation, and that I have provided the debtor with a copy of this document.  _____ Printed Name of Bankruptcy Petition Preparer  _____ Social Security Number  _____ Address  _____ Names and Social Security numbers of all other individuals who prepared or assisted in preparing this document:  If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person.  X _____ Signature of Bankruptcy Petition Preparer  _____ Date  A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both 11 U.S.C. § 110; 18 U.S.C. § 156.	
<b>Signature of Debtor (Corporation/Partnership)</b> I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor. The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.  X _____ Signature of Authorized Individual  _____ Printed Name of Authorized Individual  _____ Title of Authorized Individual  _____ Date			